Effective October 1, 2000 OCTOBER 1, 2000 OCTOBER 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			Ö					RATE	FEE		RATE	FEE	
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC F	EE 355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		· 6			X\$ 9=	=	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		6			X40=	240	OR	X80=	·	
MULTIPLE DEPENDENT CLAIM PRESENT											+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								+135: TOTA		OR			
									1 595	OR	TOTAL	-	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	L ENTITY	OR	OTHER SMALL:		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI-	1	RATE	ADDI- TIONAL FEE	
	Total	. 9	Minus	2	و	=		X\$ 9=	=	OR	X\$18=		
	Independent	. 9	Miņus	***	9	=		X40=		OR	X80=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM		J	+135		OR	+270=		
and the Company of t The Company of the Company of								ТОТ	1	-	TOTAL		
ADDI										JOR	ADDIT. FEE	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
s er der a Skiljer		(Column 1)	g Jay Temmil Hadiga (mn 2) HEST ःः	(Column 3)			ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	The second second		RATE	TIONAL FEE	
	Total	. 7	Minus	Z	,0	=		X\$ 9:	<u>.</u>	OR	X\$18=		
	Independent	• 5	Minus	*** *	7	=	1	X40=	•	OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135	= .	OR	+270=		
								TOT ADDIT. F	AL	OR	TOTAL		
(Column 1) (Column 2) (Column 3)									EE		ADDIT. FEE		
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 2	Minus	** 2	20	=		X\$ 9=		OR	X\$18=		
	Independent	• (Minus	***	9	=		X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDEN				T CLAIM					1			
	If the entry in eals:	mn 1 je loce than t	he entry in col	ump 9 wei	te "()" in ~~	lumn 3	•	+135		OR	+270=		
**	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 								AL EE	OR	TOTAL ADDIT. FEE		
	The "Highest Nur	mber Previously Pa	nid For" (Total	or Independ	dent) is the	highest numb	er fo	und in the	appropriate b	ox in co	olumn 1.	•	

Application or Docket Number